

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 9 OF 25
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

Heritage Action For America

Full Name (Last, First, Middle Initial) of Payee Dwayne Carson		Date MM / DD / YYYY 10 / 24 / 2012	
Mailing Address 330 F St NE		Amount 148.28	
City Washington	State DC	Zip Code 20002	
Purpose of Expenditure Staff - GOTV/Palm Card Distribution		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 78904.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Curry Printing Co. LLC		Date MM / DD / YYYY 10 / 03 / 2012	
Mailing Address 10730 Reading Rd		Amount 942.43	
City Cincinnati	State OH	Zip Code 45241	
Purpose of Expenditure Collateral Materials/Palm Cards		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8437.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Curry Printing Co. LLC		Date MM / DD / YYYY 10 / 03 / 2012	
Mailing Address 10730 Reading Rd		Amount 942.43	
City Cincinnati	State OH	Zip Code 45241	
Purpose of Expenditure Collateral Materials/Palm Cards		Category/ Type 004	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2245.44		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		2033.14	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)			